### FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549



### FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

Ц	hours per res	ponse1					
SEC USE ONLY							
	Prefix	Serial					
ļ	DATE R	ECEIVED					

UNIFORM LIMITED OFFERING EXEM	PTION
Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  Partners Fund LP	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	- Col
A. BASIC IDENTIFICATION DATA	40 N N S ZOO4 > 1
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	152
Address of Executive Offices (Number and Street, City, State, Zip Code)  Sausalito CA 94965	Telephone Number (Inpluding Area Code) (415) 289-0745
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Investment Advisor	PROCESCED
Type of Business Organization    Corporation	please specify): NOV 2 2 2004
Actual or Estimated Date of Incorporation or Organization: Month Year  Actual or Estimated Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	
GENERAL INSTRUCTIONS	

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### · ATTENTION –

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

of 9

A. BASIC IDENTIFICATION DATA	
2. Enter the information requested for the following:	
• Each promoter of the issuer, if the issuer has been organized within the past five years;	
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer	
Last general and managing partner of partnership issuers.	
Each promoter of the issuer, if the issuer has been organized within the past five years;  Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issue. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and  Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and  Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and  Each executive officer brown and such as a corporate general and managing partners of partnership issuers; and  Each executive officer brown and such as a corporate general and managing partners of partnership issuers; and  Each executive officer brown and such as a corporate general and managing partner brown and such as a corporate general and managing partner brown and such as a corporate general and such as a corporate general and managing partner brown and such as a corporate general and such a	
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, Lity, State, Lip Code)	
Managing Partner	
Full Name (Last name first, if individual)	
1070 Bridsoway Sousalita CA 949105	
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or  Managing Partner	
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)	

				<del></del>	В. П	NFORMAT	ION ABOU	T OFFERI	NG				
1.	Has the	issuer sold	i, or does th	ne issuer ir	itend to se	ll. to non-a	ccredited i	nvestors in	this offeri	ng?		Yes	No
••	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?  Answer also in Appendix, Column 2, if filing under ULOE.									·· <u>L</u>			
2.	2. What is the minimum investment that will be accepted from any individual?									. \$ <u>100</u>	0,000		
3.	Does the offering permit joint ownership of a single unit?									Yes	, No □		
4.	Enter th	ie informat	ion request	ed for eac	h person w	ho has bee	n or will b	e paid or g	given, dire	ctly or ind	irectly, an	у	
	commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering.  If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state												
	or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Ful	Full Name (Last name first, if individual)												
Bus	iness or	Residence	Address (N	umber and	1 Street, Ci	ty, State, Z	ip Code)						
N		- alaka d Da	oker or Dea	.1									
Nar	ne of Ass	sociated Br	oker or Dea	aier									
Stat			Listed Has										
	(Check	"All States	" or check	individual	States)	••••••••••	•••••			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		. [ Al	l States
	AL	AK IN	AZ IA	[AR]	CA KY	CO	CT ME	DE MD	DC MA	FL MI	GA MN	HI MS	ID MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Ful	l Name (1	Last name	first, if indi	vidual)									
Bus	siness or	Residence	Address (N	Number an	d Street, C	ity, State, Z	Zip Code)					<u>-</u>	
Nar	ne of Ass	sociated Br	oker or Dea	aler									
Star	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	" or check	individual	States)		***************************************	•••••	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			. 🔲 Al	l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL MT	NE NE	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Ful	l Name (l	Last name	first, if indi	vidual)	·								
Bus	siness or	Residence	Address (N	Number an	d Street C	ity. State	Zin Code)		,,				
			-									,	
Nar	ne of Ass	sociated Br	oker or Dea	aler									
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check "All States" or check individual States)									l States			
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID NO
	IL MT	IN NE	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	$\overline{\mathrm{WV}}$	WI	$\overline{\overline{\mathrm{WY}}}$	PR

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and		
	already exchanged.	Aggragata	Amount Already
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	S	\$
	Equity	S	<u> </u>
	Common Preferred		
	Convertible Securities (including warrants)	<u> </u>	\$
	Partnership Interests	S	
	Other (Specify)	S	
	Total		\$ <u>0.00</u>
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors		\$ 5,000,000
	Non-accredited Investors	<u> </u>	s_ <del>'</del>
	Total (for filings under Rule 504 only)	0 37	\$_0.00
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504	······································	\$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	[	] \$_ <del>-D</del>
	Printing and Engraving Costs	[	] \$_ <del>-Q</del>
	Legal Fees	[	\$_ <del>-0-</del>
	Accounting Fees	[	
	Engineering Fees	[	] \$ <u> </u>
	Sales Commissions (specify finders' fees separately)	[	] \$_ <del></del>
	Other Expenses (identify)	[	] \$ <u>-</u>
	Total	_	

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		\$
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.		
		Payments to Officers, Directors, &	Payments to
	Outside and Govern	Affiliates	Others
	Salaries and fees	_	
	Purchase of real estate	\\$	
	and equipment [	_	_ □ \$_ <del>-&gt;</del>
	Construction or leasing of plant buildings and facilities	\$_ <del>-&amp;-</del>	
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another		
	issuer pursuant to a merger)	]\$_ <del>-Q</del>	
	Repayment of indebtedness	-    \$_ <b>-&amp;</b>	s <del></del>
	Working capital	]\$_ <b>-&gt;</b>	s_ <del></del>
	Other (specify):	 	
		<b></b>	\$
	Column Totals	\$_0.00	\$_0.00
	Total Payments Listed (column totals added)	□ \$ <u></u> \$	.00
	D. FEDERAL SIGNATURE		
sig the	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commis information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Function (Print or Type)	sion, upon writte	
(,	bermark Birtners	11/16/04	
Na	me of Signer (Print or Type)  Title of Signer (Print or Type)		
7	Tames E. Demmert Managing Partner		
_	12. 23. 3 1 21. 11. 11. 11. 11. 11. 11. 11. 11. 1		

# - ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

cation Yes No								
se.								
The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.								
on written request, information furnished by the								
The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.								
otice to be signed on its behalf by the undersigned								
Date 11/16/04								
ner								
t t								

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

#### **APPENDIX** 2 3 5 1 4 Disqualification Type of security under State ULOE and aggregate Intend to sell (if yes, attach to non-accredited offering price Type of investor and explanation of investors in State offered in state amount purchased in State waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited Investors State Yes No Investors Yes Amount No Amount ALΑK ΑZ AR CA37 5,000,000 CO CTDE DC FL GA ΗI ID ILſΝ IΑ KS KY LA MEMD MA ΜI MNMS

## APPENDIX 1 2 3 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach to non-accredited offering price Type of investor and explanation of investors in State offered in state amount purchased in State waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Non-Accredited Accredited State Yes No Investors Amount **Investors** Amount Yes No MO MT NE NV NH NJ NM NY NC ND OH OK OR PA RI SCSD TN TX UT VT ٧A WA WV WI

	APPENDIX									
1		2	3		4					
	to non-a investor	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)					
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY		V								
PR		~								